

3/2/83
FEE D
O.I.P.

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	75281	
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	A.S	8573	7-27-80

INDEX OF CLAIMS

✓	.....	Rejected	N	.....	Non-elected
=	.....	Allowed	I	.....	Interference
—	(Through numeral).....	Canceled	A	.....	Appeal
÷	.....	Restricted	O	.....	Objected

[illegible]

Claim		Date						
Final	Original	9/13	10/19	11/30	12/28	1/11	1/17	
53			✓	✓	✓	✓	✓	
54			✓	✓	✓	✓	✓	
55			✓	✓	✓	✓	✓	
56		N	N	N	N	N	N	
57		N	N	N	N	N	N	
58		N	N	N	N	N	N	
59		✓	✓	✓	✓	✓	✓	
60		N						
61								
62								
63								
64								
65		✓	✓	✓	✓	✓	✓	
66		N	N	N	N	N	N	
67		✓	✓	✓	✓	✓	✓	
68								
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71				✓	✓	✓	✓	
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Claim		Date
Final	Original	
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BEST AVAILABLE COPY

**If more than 150 claims or 10 actions
staple additional sheet here**